

AMENDMENT TO THE SPECIFICATION

Please amend paragraph [0006] as follows:

[0006] For many patients, cannulating the CS is the one-step procedure of choice for biventricular lead placement. However, in over 20% of these patients, lead placement in the CS may be unsuccessful or a very lengthy procedure, or the lead may become dislodged from the CS. Other difficulties with this lead placement procedure may also include unavailability of a suitable CS branch, significant rotation of the CS due to left atrium and left ventricle dilation, and the presence of the ~~Tebesian~~ Thesbesian valve therein. In most instances, these problems are identified only at the time of the interventional procedure, and thus the procedure is typically either completely abandoned or the patient is brought back into the operating room for a second procedure where, through a surgical incision (an expensive and invasive procedure) the left ventricle lead is placed epicardially.